



Patent  
Serial No.: 10/621,229  
Docket No.: 158235-0008

DECLARATION  
Utility Application

As a below named inventor, I hereby declare that:

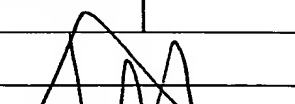
My residence, post office address and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled **USE OF FLUMAZENIL IN THE PRODUCTION OF A DRUG FOR THE TREATMENT OF ALCOHOL DEPENDENCY**, the specification of which was filed on **July 15, 2003** as United States Application Serial No. **10/621,229**.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment(s) referred to above. I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, § 119(a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Date of Filing	Priority Claimed	
			Yes	No
PCT/ES02/00008	PCT	January 10, 2002	X	
P 200100106	ES	January 17, 2001	X	

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements are made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Title 18, United States Code, § 1001 and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

201	FULL NAME OF INVENTOR	FIRST Name <b>Juan</b>	MIDDLE Initial <b>Jose</b>	LAST Name <b>LEGARDA IBAÑEZ</b>	
	RESIDENCE & CITIZENSHIP	City <b>Madrid</b>	State or Foreign Country <b>Spain</b>	Country of Citizenship <b>Spain</b>	
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INVENTOR'S SIGNATURE  DATE <b>10/11/03</b>					

**POWER OF ATTORNEY  
By Assignee**



**Hythiam, Inc.**, assignee(s) of the application for United States Letters Patent for an improvement in

**USE OF FLUMAZENIL IN THE PRODUCTION OF A  
DRUG FOR THE TREATMENT OF ALCOHOL DEPENDENCY**

by **Juan Jose Legarda Ibañez**,

the specification of which:

- ☐ is filed herewith, OR  
☒ was filed on July 15, 2003, having U.S. Patent Application Serial No. 10/621,229

does hereby appoint as my attorneys and/or agents, with full power of substitution and revocation, to prosecute this application and transact all business in the United States Patent and Trademark Office, and in countries other than the United States, and to do all things necessary or appropriate therefor before any competent International Authorities in connection with any international patent application(s) corresponding to the above-identified application, all of the registered practitioners identified by Customer Number 22249:



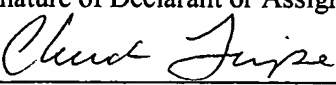
IRELL & MANELLA LLP  
1800 Avenue of the Stars  
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Los Angeles, CA 90067  
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Please send all inquiries to **Carol A. Schneider** at the above Customer Number.

I, the undersigned, declare that I have reviewed copies of the documentary evidence establishing chain of title to the patent application identified above from the inventor(s) to the assignee(s), which:

- ☒ is filed for recordation herewith; or  
☐ was recorded at Reel \_\_\_\_\_, Frame \_\_\_\_\_; or  
☐ has been sent for recordation under separate cover, copy attached herewith.

To the best of the undersigned's knowledge and belief, title is in the assignee(s) identified above. Furthermore, the undersigned is empowered to sign this document on behalf of the assignee(s).

Full Name of Assignee:	Hythiam, Inc.	
Post Office Address:	11111 Santa Monica Blvd., Suite 550, Los Angeles, CA 90025	
Signature of Declarant or Assignee:		Date: November 5, 2003
Full Name of Declarant If Other Than Assignee:	Chuck Timpe	
Title of Declarant:	Chief Financial Officer	
Address of Declarant:	11111 Santa Monica Blvd., Suite 550, Los Angeles, CA 90025	